Fill in this information to identify your case:	
Debtor 1 Brian L Schmidt	
Debtor 2 (Spouse, if filing)	
United States Bankruptcy Court for the: EASTERN DISTRICT OF PENNSYLVANIA	
Case number 15-18895	Check if this is:
(If known)	An amended filing
Official Form 106I	A supplement showing postpetition chapter 13 income as of the following date: 9/09/2016 MM / DD/ YYYY

Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Par	t 1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job, attach a separate page with information about additional employers.	Fundament status	■ Employed	☐ Employed
		Employment status	☐ Not employed	■ Not employed
		Occupation	Regional Manager	
	Include part-time, seasonal, or self-employed work.	Employer's name	Boviet Solar	
	Occupation may include student or homemaker, if it applies.	Employer's address	2033 Gateway San Jose, CA 95110	
		How long employed th	nere? 4 months	
Par	f 2: Give Details About Mor	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

For Debtor 1

For Debtor 2 or

non-filing spouse List monthly gross wages, salary, and commissions (before all payroll 0.00 9,543.04 2. deductions). If not paid monthly, calculate what the monthly wage would be. Estimate and list monthly overtime pay. 3. 0.00 0.00 Calculate gross Income. Add line 2 + line 3. 9,543.04 0.00

Official Form 106I Schedule I: Your Income page 1

Deb	tor 1	Brian L Schmidt	-		Case	e number (if know	vn)	15-18	895		
					Fo	r Debtor 1			Debtor filing s	2 or pouse	
	Cop	y line 4 here	4.		\$_	9,543.0)4	\$		0.00	<u>)</u>
5.	List	all payroll deductions:									
	5a.	Tax, Medicare, and Social Security deductions	5a	à.	\$	1,745.3	36	\$		0.00)
	5b.	Mandatory contributions for retirement plans	5b).	\$	0.0		\$		0.00	<u> </u>
	5c.	Voluntary contributions for retirement plans	50) .	\$	0.0	00	\$		0.00	<u> </u>
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.0	00	\$		0.00	<u> </u>
	5e.	Insurance	5€	€.	\$	0.0	00	\$		0.00)
	5f.	Domestic support obligations	5f		\$_	0.0	00	\$		0.00	
	5g.	Union dues	50		\$_	0.0	00	\$		0.00	
	5h.	Other deductions. Specify:	5h	1.+	\$_	0.0	00	+ \$		0.00	<u>)</u>
6.	Add	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$_	1,745.3	86	\$		0.00	<u>)</u>
7.	Cald	culate total monthly take-home pay. Subtract line 6 from line 4.	7.		\$_	7,797.6	8	\$		0.0	<u>)</u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total									
		monthly net income.	88	à.	\$	0.0	00	\$		0.00)
	8b.	Interest and dividends	8b).	\$	0.0	00	\$		0.00	<u> </u>
	8c.	Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	80		\$	0.0	10	\$		0.00	1
	8d.	Unemployment compensation	80		\$-	0.0		\$—		0.00	_
	8e.	Social Security	86		\$-	0.0		\$		0.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$	0.0		\$		0.00	_
	8g.	Pension or retirement income	8g	J.	\$	0.0	00	\$		0.00	<u> </u>
	8h.	Other monthly income. Specify: IRS refund	8h	1.+	\$	750.0	00	+ \$		0.00)
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.		\$	750.0	00	\$		0.0	00
10	Cald	culate monthly income. Add line 7 + line 9.	10.	2		8,547.68 +	¢		0.00		8,547.68
10.		the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ψ_		0,347.00	Ψ-		0.00	- Ψ -	0,347.00
11.	Inclu othe	e all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your or friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not acify:	depe						chedule 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The rese that amount on the Summary of Schedules and Statistical Summary of Certainies							12.	\$	8,547.68
10	D-		2						l	Comb	ined ily income
13.	י סט	/ou expect an increase or decrease within the year after you file this form No.	?								
	_	Yes Explain:									